

GED Testing Service

of the American Council on Education
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OFFICIAL GED TESTING CENTER ADDRESS CHANGE

Date: _____

Change: Shipping Address ☐

Billing Address ☐

Both ☐

CENTER 10-1digit ID NUMBER

CENTER NAME

CURRENT ADDRESS

CITY	JURISDICTION	ZIP/POSTAL CODE
TELEPHONE NUMBER	FAX NUMBER	EMAIL

NEW SHIPPING ADDRESS

CITY	JURISDICTION	ZIP/POSTAL CODE
TELEPHONE NUMBER	FAX NUMBER	EMAIL

CURRENT BILLING ADDRESS

CITY	JURISDICTION	ZIP/POSTAL CODE
TELEPHONE NUMBER	FAX NUMBER	EMAIL

NEW BILLING ADDRESS

CITY	JURISDICTION	ZIP/POSTAL CODE
TELEPHONE NUMBER	FAX NUMBER	EMAIL

The new location meets or exceeds the necessary qualifications as outlined in the GED Examiner's Manual.

GED Administrator

Jurisdiction